

## Childcare / ECE Provider

# Vaccine Eligibility Verification Form

To receive a COVID-19 Vaccine as part of Phase 1B, Tier 1 for Childcare workers, the following form may be used to certify eligibility for a childcare provider or an employee of a childcare provider. This form may also be used by Home Visitation programs that employ home visitors that visit families in their home.

Please ONLY complete the section that applies to you to determine what section(s) you need to fill out:

### I am a Non-Licensed Childcare Provider Working with One Family

I certify that I am a childcare provider that is not required to have a childcare license and currently care for or intend to care for children.

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip code: \_\_\_\_\_

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Contracting Family Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### I am a Licensed Family Childcare Home (FCC) Provider

I certify that I hold a current, valid State of California Child Care License and am currently or intend to care for children.

• Facility Name: \_\_\_\_\_ License Facility Number: \_\_\_\_\_

• Address of Facility: \_\_\_\_\_ City: \_\_\_\_\_ Zip code: \_\_\_\_\_

I Have the Following Employee(s) Working in my Family Childcare Home:

• Employee Name: \_\_\_\_\_

• Employee Name: \_\_\_\_\_

• Employee Name: \_\_\_\_\_

• Employee Name: \_\_\_\_\_

Signature of Family Childcare Home License Holder: \_\_\_\_\_ Date: \_\_\_\_\_

For more information on COVID-19 vaccines, please visit:

**coronavirus-sd.com/vaccine**

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### I employ Childcare/ ECE Professionals Outside of the Home Including: Licensed, License Exempt Care and Home Visitation Staff for Infant/Toddlers, Preschool, or School Aged Children.

I certify that the person(s) named below or on the attached personnel list is/are employed at my childcare organization:

- Facility Name: \_\_\_\_\_
- License Facility Number (if applicable): \_\_\_\_\_
- Address of Facility: \_\_\_\_\_ City: \_\_\_\_\_
- Zip code: \_\_\_\_\_
- I Have the Following Employees Working in my Childcare/ECE Organization:
  - Employee Name: \_\_\_\_\_
  - Employee Name: \_\_\_\_\_
  - Employee Name: \_\_\_\_\_
  - Employee Name: \_\_\_\_\_
  - Employee Name: \_\_\_\_\_
  - Employee Name: \_\_\_\_\_
  - Employee Name: \_\_\_\_\_
  - Employee Name: \_\_\_\_\_
  - Employee Name: \_\_\_\_\_
- \*if more employees are employed please attach an additional page as needed

Signature of Authorized Personnel to Verify Employment: \_\_\_\_\_ Date: \_\_\_\_\_

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# Childcare Provider Types & Documentation Recommendations

Child Care Provider Types	Description of Child Care Setting	Documentation Recommendations
Family Friend and Neighbor Caregiver	Childcare provided in the home by one individual, for a child that is not their own. Often a family member, friend of the family, or hired "babysitter/nanny".	Letter from CDA or YMCA + Photo ID <b>OR</b> Signed Letter From Family Employing Provider + Photo ID <b>OR</b> Signed "Childcare Vaccine Eligibility Verification Form" + Photo ID
Licensed Family Child Care (FCC) Homes	Child Care Provided out of a home for small groups of mixed age children. No more than 14 children per home. May have 1 or 2 staff. Family of childcare provider lives in the home where care provided.	Signed "Childcare Vaccine Eligibility Verification Form" + Photo ID  <b>Employees of a Family Childcare Home:</b>  Signed "Childcare Vaccine Eligibility Verification Form" + Photo ID
Licensed Child Care Center	Childcare licensed by Community Care Licensing or exempt from licensure. Care provided in community locations. Sites will have multiple staff providing direct care to children and supporting administrative duties.	Signed letter from their employer on letterhead + Photo ID <b>OR</b> Signed "Childcare Vaccine Eligibility Verification Form" + Photo ID <b>OR</b> Employee ID Badge with Photo that Establishes You as Childcare Sector Staff
Home Visitation Programs	Home visitation programs employ home visitors that conduct visits in the home. Sites will have multiple staff providing direct care to children and their families. This may include a hybrid approach to serving families with virtual and in-person approaches.	Signed letter from their employer on letterhead + Photo ID <b>OR</b> Signed "Childcare Vaccine Eligibility Verification Form" + Photo ID <b>OR</b> Employee ID Badge with Photo that Establishes You as Home Visitation Staff

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